## Appendix H

# **Glossary**

### Access to care

The extent to which care is available to a patient in case of need. There are several types of barriers to access to health services including funding, physical, programming, and personal barriers.

Source: Work Group for Community Health and Development at the University of Kansas. Developing and Increasing Access to Health and Community Services. Community Tool Box. Available at: <a href="http://ctb.ku.edu/tools/en/sub\_section\_main\_1243.htm">http://ctb.ku.edu/tools/en/sub\_section\_main\_1243.htm</a>.

## **Accountability**

The responsibility of program managers and staff to provide evidence to stakeholders and funding agencies that a program is effective, follows all legal and fiscal requirements, and has implemented or will implement the procedures and activities needed to produce the program's intended outcomes.

Source: MacDonald G, Starr G, Schooley M, Yee SL, Klimowski K, Turner K. Introduction to program evaluation for comprehensive tobacco control programs. Atlanta (GA): Centers for Disease Control and Prevention; 2001. Available from <a href="http://www.cdc.gov/tobacco/evaluation\_manual/Evaluation.pdf">http://www.cdc.gov/tobacco/evaluation\_manual/Evaluation.pdf</a>.

# **Behavioral Risk Factor Surveillance System (BRFSS)**

A telephone survey conducted by the departments of health of all 50 states, the District of Columbia, and three territories with assistance from CDC. The BRFSS is the primary source of information for states and the nation on the health-related behaviors of adults and includes questions related to behaviors associated with preventable chronic diseases, injuries, and infectious diseases.

Source: www.cdc.gov/brfss/index.htm.

#### **Calculated Variable**

A variable created by combining several variables from the data file.

Source: <a href="http://www.cdc.gov/BRFSS/technical">http://www.cdc.gov/BRFSS/technical</a> infodata/surveydata/2005.htm#survey

### **Data**

Documented information or evidence of any kind.

Source: MacDonald G, Starr G, Schooley M, Yee SL, Klimowski K, Turner K. Introduction to program evaluation for comprehensive tobacco control programs. Atlanta (GA): Centers for Disease Control and Prevention; 2001. Available from http://www.cdc.gov/tobacco/evaluation\_manual/Evaluation.pdf.

#### Data sources

The persons, documents, products, activities, events, or records from which the data are obtained

Source: Wheeler P, Haertel G, Scriven M. (1992). Teacher Evaluation Glossary, Kalamazoo, MI: CREATE Project, The Evaluation Center, Western Michigan University.

# **Evaluation (see Program Evaluation)**

## **Evidence-based public health**

Evidence-based public health is the process of using evidence-based interventions that are compatible with community preferences in order to improve the health of populations. The evidence base for interventions may include scientific evidence from a wide range of disciplines and/or practice-based wisdom.

Adapted from: Kohatsu N, Robinson J, & Torner J. Evidence-based public health: an evolving concept. American Journal of Preventive Medicine, 2004, 27(5), 417-21.

Brownson R, Gurney J, & Land G. Evidence based decision making in public health. Journal of Public Health Management Practice, 1999, 5(5), 86-97.

# Fugitive literature (also called gray literature)

Grey literature is that which is produced by government, academies, business, and industries, both in print and electronic formats, but which is not controlled by commercial publishing interests and where publishing is not the primary activity of the organization. Sources of fugitive literature include, but are not limited to, technical reports; conference papers and proceedings; theses and dissertations; business documents; newsletters, trade literature and house journals; government publications; working papers; white papers; and committee reports.

Adapted from: Aina LO. Grey literature and library and information studies (LIS): a global perspective. In: Fourth International Conference on Grey Literature, New frontiers in grey literature. Amsterdam: GreyNet, 2000:25–31.

# **Healthy People 2010**

A set of national health objectives designed to identify the most significant preventable threats to health and to establish national goals to reduce these threats.

Source: www.health.gov/healthypeople

#### Indicator

A specific, observable, and measurable characteristic or change that shows the progress a program is making toward achieving a specified outcome.

Source: MacDonald G, Starr G, Schooley M, Yee SL, Klimowski K, Turner K. Introduction to program evaluation for comprehensive tobacco control programs. Atlanta (GA): Centers for Disease Control and Prevention; 2001. Available from <a href="http://www.cdc.gov/tobacco/evaluation\_manual/Evaluation.pdf">http://www.cdc.gov/tobacco/evaluation\_manual/Evaluation.pdf</a>.

## Inputs

The people, money, and information used to implement and run a program.

Source: U.S. Department of Health and Human Services. Centers for Disease Control and Prevention. Office of the Director, Office of Strategy and Innovation. Introduction to program evaluation for public health programs: A self-study guide. Atlanta, GA: Centers for Disease Control and Prevention, 2005.

## Integration

The coordination of efforts across diseases and risk factors, levels of the socio-ecological model, partners, or interventions settings. The Institute of Medicine recommends the clustering or consolidation of categorical grants (i.e., integration across diseases and risk factors) for the purpose of increasing local flexibility to address priority health concerns and enhance the efficient use of limited resources.

Source: Institute of Medicine. The future of the public's health in the 21<sup>st</sup> century. The National Academies Press, 2002, p. 8. Available from: <a href="http://www.iom.edu/CMS/3793/4720/4304.aspx">http://www.iom.edu/CMS/3793/4720/4304.aspx</a>.

### Intervention

Any kind of planned activity or group of activities (including programs, policies, and laws) designed to prevent disease or injury or promote health in a group of people.

Source: Zaza S, Bris PA, Harris KW (eds), Guide to community preventive services: what works to promote health. Task Force on Community Preventive Services. New York, NY: Oxford University Press, 2005.

# Logic model

A systematic and visual way to present and share your understanding of the relationships among the resources you have to operate your program, the activities you plan, and the changes or results you hope to achieve.

Source: W.K. Kellogg Foundation. Logic model development guide. Battle Creek, MI. January 2004. Available at http://www.wkkf.org/pubs/tools/evaluation/pub3669.pdf

# **Objectives**

Statements describing the results to be achieved and the manner in which these results will be achieved.

Source: MacDonald G, Starr G, Schooley M, Yee SL, Klimowski K, Turner K. Introduction to program evaluation for comprehensive tobacco control programs. Atlanta (GA): Centers for Disease Control and Prevention; 2001. Available from <a href="http://www.cdc.gov/tobacco/evaluation\_manual/Evaluation.pdf">http://www.cdc.gov/tobacco/evaluation\_manual/Evaluation.pdf</a>.

#### **Outcomes**

The changes in a program's target population or in an environmental factor (e.g., local smoking laws or school curriculums) that are expected to result from a program's activities.

Source: U.S. Department of Health and Human Services. Centers for Disease Control and Prevention. Office of the Director, Office of Strategy and Innovation. Introduction to program evaluation for public health programs: A self-study guide. Atlanta, GA: Centers for Disease Control and Prevention, 2005.

## **Outputs**

The direct products of program activities (e.g., a physical activity class for elderly people); immediate measures of what the program did.

Source: U.S. Department of Health and Human Services. Centers for Disease Control and Prevention. Office of the Director, Office of Strategy and Innovation. Introduction to program evaluation for public health programs: A self-study guide. Atlanta, GA: Centers for Disease Control and Prevention, 2005.

#### Performance measurement

The routine monitoring of program inputs, outputs, and short, intermediate and long-term outcomes.

Adapted from: Newcomer, K.E. 1997. Using Performance Measurement to Improve Programs. New Directions for Evaluation 75: 5-14.

### **Performance measures**

A quantitative or qualitative characterization of a program's performance. Performance measures may characterize how a program was implemented, how products and services were delivered by a program to the target audience, or to what extent the program succeeded in achieving its objectives.

Source: U.S. Government Accountability Office. Performance measurement and evaluation. Definitions and relationships. GAO-05-739SP. May 2005.

#### Practice wisdom

The ability to base sound judgments on deep understandings in conditions of uncertainty. Within practice wisdom, practitioners produce and transform valuable and credible knowledge which is gained, in part, through practice experience.

Source: O'Sullivan T, Some theoretical propositions on the nature of practice wisdom. Journal of Social Work 5(2): 221-242, 2005.

## **Program Assessment Rating Tool (PART)**

A questionnaire designed to help assess the management and performance of federal programs. It is used to evaluate a program's purpose, design, planning, management, results, and accountability to determine its overall effectiveness.

Source: U.S. Office of Management and Budget. The Program Assessment Rating Tool (PART). Available at: http://www.whitehouse.gov/omb/expectmore/part.html.

### **Program evaluation**

The systematic collection of information about the activities, characteristics, and outcomes of programs to make judgments about the program, improve program effectiveness, and/or inform decisions about future programming.

Source: Patton MQ. Utilization-Focused Evaluation: The New Century Text, 3<sup>rd</sup> edition. Thousand Oaks, California: Sage, 1997.

# **Proxy**

A measure used to approximate the exact measure desired when you cannot measure exactly what you want or need.

Source: http://patientsafetyed.duhs.duke.edu/module\_a/measurement/proxy\_measures.html

### Reach

The proportion of intended target audience that participates in an intervention.

Source: Steckler A, Linnan L, editors. Process evaluation in public health interventions. San Francisco: Jossey-Bass; 2002.

# Socio-ecological model

A model which identifies five levels of influence for health-related behaviors and conditions: individual, interpersonal, organizational, community, and public policy. This model is an example of an ecological perspective, which emphasizes the interaction between, and interdependence of, factors within and across all levels of a health problem.

Sources: McLeroy KR, Bigeau D, Steckler A, Glanz K, An ecological perspective on health promotion programs. Health Education Quarterly 15(4): 351-377, 1988; and National Cancer Institute, Theory at a glance: a guide for health promotion practice (2<sup>nd</sup> edition). U.S. Department of Health and Human Services, 2005.

### **Stakeholders**

People or organizations that are invested in the program, are interested in the results of the evaluation, and/or have a stake in what will be done with the results of the evaluation.

Source: U.S. Department of Health and Human Services. Centers for Disease Control and Prevention. Office of the Director, Office of Strategy and Innovation. Introduction to program evaluation for public health programs: A self-study guide. Atlanta, GA: Centers for Disease Control and Prevention, 2005.

### Surveillance

The ongoing, systematic collection, analysis, interpretation, and dissemination of data regarding a health-related event for use in public health action to reduce morbidity and mortality and to improve health.

Source: Centers for Disease Control and Prevention. Updated Guidelines for Evaluating Public Health Surveillance Systems. MMWR 2001; 50(RR13): 1-35. Available from <a href="http://www.cdc.gov/mmwr/preview/mmwrhtml/rr5013a1.htm">http://www.cdc.gov/mmwr/preview/mmwrhtml/rr5013a1.htm</a>.

### Sustainability

The continuation of community health or quality of life benefits over time.

Source: Center for Civic Partnerships, Public Health Institute (2001). Sustainability Toolkit: 10 Steps to Maintaining Your Community Improvements. Oakland, CA: Public Health Institute.

# Youth Risk Behavior Surveillance System (YRBSS)

National, state, and local school-based surveys of representative samples of 9th through 12th grade students conducted every two years. YRBSS data are used to monitor the prevalence of health risk behaviors that contribute to the leading causes of death, disability and social problems among youth and adults in the United States.

Source: http://www.cdc.gov/HealthyYouth/yrbs/index.htm